



Application To Service Loans

Submitted by: _____

Date: _____

CALIFORNIA HOUSING FINANCE AGENCY
Homeownership Programs
1121 L Street, 7th Floor
Sacramento, CA 95814
(916) 324-8088
Fax: (916) 324-6589
www.calhfa.ca.gov



Application to Service Loans

Becoming a Loan Servicer for CalHFA

The following information outlines general requirements for servicing loans sold to CalHFA. In evaluating your application, CalHFA will use certain criteria to assess your company's financial position, insurance coverage, quality control operation, servicing operation, and other relevant factors. CalHFA does this to verify that your company is capable of handling the responsibilities associated with servicing loans on our behalf. CalHFA encourages you to review the criteria to determine your eligibility for becoming a CalHFA approved loan servicer.

The applicant is required to complete this application together with all attachments and have it signed by an authorized officer. When the Application is received by CalHFA, you will receive a written response indicating your qualification and the type of approval granted together with any contingency restrictions. Completing this form does not guarantee an automatic approval to service loans for CalHFA. Upon granting approval, CalHFA will require the following documentation to be provided:

- Receipt of a signed Servicing Agreement ("SA");
- Executed Opinion of Counsel Letter (Exhibit A in the SA);
- Letter of Authorization for Tax and Insurance Custodial Account;
- Letter of Authorization for Principal and Interest Custodial Account.



Application to Service Loans

APPLICANT CORPORATE INFORMATION

Incorporation Name (Legal): _____

Mailing Address: _____
(Street or P. O. Box) _____ (City) _____
(State) (Zip)

Telephone: (____) _____

Under the Name of, doing business as (dba): _____

WHERE APPLICANT IS A BANK, THRIFT OR CREDIT UNION, PLEASE COMPLETE

Published Abbreviated Name (as Listed by IDC Financial Publishing, Inc.) _____

City, State of headquarters location (as published by IDC Financial Publishing, Inc.) _____

LEGAL STATUS OF APPLICANT

Incorporated on (Date): _____

Under the laws of: _____

- ☐ Mortgage Banker, corporate headquarters located in: _____
- ☐ Commercial bank, corporate headquarters located in: _____
- ☐ Thrift, corporate headquarters located in: _____
- ☐ Credit union, corporate headquarters located in: _____
- ☐ Partnership, corporate headquarters located in: _____
- ☐ Other (specify): _____



Application to Service Loans

CORPORATE LIAISON

Corporate Contact Liaison Person: _____

Title: _____

Address: _____

(City) (State) (Zip)

Telephone: (____) _____

Fax: (____) _____

E-mail Address: _____

PRINCIPAL CORPORATE OFFICERS

Name

Title

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____



Application to Service Loans

PARENT COMPANY OF APPLICANT (AS APPLICABLE)

Parent Company: Legal Name: _____

Mailing Address: _____

(City) (State) (Zip)

WHERE PARENT COMPANY IS A BANK, SAVINGS BANK, PLEASE COMPLETE

Published Abbreviated Name (as Listed by IDC Financial Publishing, Inc., a bank, saving bank financial rating company)

City, State of headquarters location (as published by IDC Financial Publishing, Inc.)

Officer Disclosure

Please disclose by a separate attachment whether any of the principal officers, directors, partners, or owners with an interest of 5% or more:

- 1) Have been convicted of a crime or named in a pending criminal proceeding (excluding traffic violations and other minor offenses);
- 2) Have been subject to an order, judgment, or decree enjoining him or her from engaging in any activities in connection with any type of business transaction (including the purchase or sale of a security) or acting as (or as an associated or affiliated person of) an investment adviser, underwriter, broker, dealer, financial institution, or an other business; or
- 3) Have been employed by an institution within two years of its debarment by the Department of Housing and Urban Development.

Has your company ever been suspended or terminated by FHA/VA, FNMA, FHLMC, a Private mortgage insurer, or other investor? Yes ☐ No ☐

If yes, for what reason and when? _____



Application to Service Loans

Please attach the following:

- Resumes of principal officers and key personnel for each functional area;
- Evidence of fidelity bond and errors and omissions coverage in the minimum amount of \$300,000.
- Copy of most recent quality control report and management responses; and
- Copies of any signed contracts with third parties that perform origination, quality control, or servicing functions for the applicant.
- Provide a brief narrative describing the history and general scope of your operations.
- Three business references.

General Qualifications

Are you licensed to service loans at your location? Yes ☐ No ☐

Has your company been in operation for at least three Years under the same name? Yes ☐ No ☐

Do you service loans for other investors? Yes ☐ No ☐

Do you have experienced personnel in the following Key functional areas? Yes ☐ No ☐

• HUD DE Underwriter? Yes ☐ No ☐

• Quality Control? Yes ☐ No ☐

• Loan Servicing? Yes ☐ No ☐

Mandatory Qualifications

Do you have an adjusted tangible net worth of at least \$250,000? Yes ☐ No ☐

Do you have a fidelity bond and errors and omissions coverage in the minimum amount of \$300,000? Yes ☐ No ☐



Application to Service Loans

Are you a HUD (FHA) Single Family Servicer? Yes ☐ No ☐

Are you a MERS member (Loan Registry)?
(Mandatory requirement) Yes ☐ No ☐

If a member, what is your company's MERS Identification Number? _____

Do you employ full time collectors, 5 days per week
from 8 am to 8 pm Pacific Standard Time? Yes ☐ No ☐

Other Affiliations

Are you a Fannie Mae (FNMA) Seller/Servicer Lender? Yes ☐ No ☐

Do you provide financial data electronically to
Fannie Mae? Yes ☐ No ☐

Are you a Freddie Mac (FHLMC) Seller/Servicer Lender? Yes ☐ No ☐

Are you a VA Lender? Yes ☐ No ☐

Are you a USDA Rural Housing Service (RHS) lender? Yes ☐ No ☐



Application to Service Loans

STATEMENTS OF FINANCIAL CONDITION

Is your company listed by the Security Exchange Commission? Yes ☐ No ☐

If yes, which board? _____

MORTGAGE BANKERS (ONLY)

1) Attach, the last four (4) quarters (complete reports) of the Mortgage Bankers Financial Reporting Form (Fannie Mae Form 1002/Freddie Mac Form 1055/Ginnie Mae Form HUD 11750). The latest statement must be current within thirty (30) days of ending report period.

2) Attach for Servicer and parent company (as applicable), the last two (2) years audited annual Financial Statements prepared by Servicer's independent certified public accountant. The Financial Statements shall be based on the CPA's examination of Servicer's financial statements and the Servicer's loan servicing operations, including those related serviced for CalHFA. This report shall also incorporate the Uniform Single Audit Program for Mortgage Bankers. Attach the financial "Adjusted Net Worth" as defined by the audit guide for HUD and GNMA. The audited reports shall also include a balance sheet; an income statement; a statement of retained earnings; a statement of additional paid-in-capital; a statement of changes in financial position and all related notes.

If you are an approved Fannie Mae, Ginnie Mae and or Freddie Mac Seller/Servicer, mortgage companies are required to provide quarterly "Mortgage Banker Financial Reporting" data electronically. If so approved, do you authorize same to forward your financial data to California Housing Finance Agency on a quarterly basis?

Yes ☐ No ☐

We hereby authorize Fannie Mae (Form 1002), Ginnie Mae (Form HUD 11750) and Freddie Mac (Form 1055) to release Mortgage Banker's Financial Reporting data, as applicable, to California Housing Finance Agency on a quarterly basis:

By: _____

Authorized Signature

Name and Title: _____

Company: _____

Date: _____



Application to Service Loans

BANKS, THRIFTS AND CREDIT UNIONS

Attach, the last four (4) quarters (complete reports) of your "Call Report, "Thrift Financial Report" or other financial statement reporting form. The latest statement must be within thirty (30) days of ending period.



Application to Service Loans

SERVICING INFORMATION

If your company is selected as a CalHFA Servicer, how will the loans be serviced?

☐ Company will direct service the loans.

When checked, has your company had previous experience servicing CalHFA loans?

Yes ☐ No ☐

Provide the period during which your company serviced CalHFA loans (as applicable):

From (Period) through (Period)

☐ A "Private Label Servicer", as sub-servicer for company, will service loans. *

☐ Loans will be sub-serviced by a CalHFA Approved Servicer.*

When checked, please indicate the name and servicing address of the Private Label Servicer or Sub-servicer below:

Name of Company

Address

Contact Person with Telephone Number

** A separate Servicer Application and Servicing Agreement will be required for Servicer or Sub-servicer that is not currently an Approved CalHFA Servicer. Upon request, CalHFA will forward these documents together with an Approved Servicer listing.*

What company do you intend to acquire CalHFA Servicing Rights from (mandatory disclosure prior to application review)?

Name of Company

Address

Contact Person with Telephone Number



Application to Service Loans

Please provide contact information for your company's Servicing Manager:

Servicing Manager (print) _____

Area Code _____

Phone Number _____

Mailing Address: _____

(City) _____

(State) _____

(Zip) _____

Telephone: (____) _____

Fax: (____) _____

E-mail Address: _____

Does your company microfiche all collateral/origination files? Yes ☐ No ☐

Does your company maintain hazard insurance policies? Yes ☐ No ☐

If "no", does your company have a blanket insurance policy? Yes ☐ No ☐

List the primary service location (where the CalHFA loans will be serviced):

(In a separate attachment, provide a list of any other servicing locations.)

State the telephone hours your collection staff uses to contact borrowers: _____

State your collection hours according to time zone:

☐

Pacific

☐

Mountain

☐

Central

☐

Eastern

Does your staff utilize evening collection hours?

Yes

☐

No

☐

If so, please state the hours: _____

Does your staff utilize Saturday collection hours?

Yes

☐

No

☐

If so, please state the hours: _____



Application to Service Loans

Does your company utilize automated telephone calling for delinquent loans?

Yes ☐ No ☐

If yes, please indicate the degree of delinquency when utilized:

30-Day ☐ 60-Day ☐ 90-Day ☐

If yes, in addition, does your company utilize collection personnel for 30-day delinquent loans?

Yes ☐ No ☐

How many full time collectors does your company employ? _____

How many part time collectors does your company employ? _____

How many residential loans do you service? _____

What is the ratio of serviced loans per full time employee? _____
(Loans divided by number of full time employees)

COMPUTER SERVICE BUREAU, AS APPLICABLE

List the name, address and phone number of your company's computer service (if in-house, please state):

Does your company's servicing operation have the capacity to provide monthly-computerized taped reports for loan servicing/accounting Yes ☐ No ☐

Note: A separate Servicer Application and Servicing Agreement will be required for Servicers, Private Label Servicers or Sub-servicer that is not currently a CalHFA Approved Servicer. CalHFA will forward these documents together with an Approved Servicer listing upon request.



Application to Service Loans

SERVICER ORGANIZATION CONTACT LIST

CORPORATE

Servicing Address: _____

ADMINISTRATION

Servicing Manager: _____ Phone: _____

Title: _____

Fax: _____ E-mail: _____

Audit Contact: _____ Phone: _____

Title: _____

Fax: _____ E-mail: _____

FINANCIAL

Chief Operating Officer _____ Phone: _____

Title: _____

Fax: _____ E-mail: _____

INVESTOR ACCOUNTING

Manager: _____ Phone: _____

Title: _____

Fax: _____ E-mail: _____



Application to Service Loans

Servicer Organization Contact List

CUSTOMER SERVICE

Manager: _____ Phone: _____

Title: _____

Fax: _____ E-mail: _____

BORROWER ESCROW ACCOUNTS

Manager: _____ Phone: _____

Title: _____

Fax: _____ E-mail: _____

COLLECTIONS

Manager: _____ Phone: _____

Title: _____

Fax: _____ E-mail: _____

BANKRUPTCY

Manager: _____ Phone: _____

Title: _____

Fax: _____ E-mail: _____



Application to Service Loans

Servicer Organization Contact List

LOSS MITIGATION

Manager: _____ Phone: _____

Title: _____

Fax: _____ E-mail: _____

DEFAULT REPORTING

Manager: _____ Phone: _____

Title: _____

Fax: _____ E-mail: _____

FORECLOSURES

Manager: _____ Phone: _____

Title: _____

Fax: _____ E-mail: _____

AUDIT EXAMINATION REPORTS

Attach your latest servicing examination (audit) reports available from HUD (FHA) and FNMA (if more than one servicing location, attach the servicing examination reports for the proposed CalHFA loan servicing location).



Application to Service Loans

DELINQUENCY HISTORY (CALIFORNIA LOANS ONLY)

California Total Only: Single Family Serviced Loans: As of: 12/31/2001

	<u>Dollars</u> <u>(in Millions)</u>	<u>Number of Loans</u> <u>in Thousands)</u>	<u>Delinquency</u> <u>Ratio</u> <u>(#)</u>
Total Portfolio Bal.:	\$ _____	# _____	_____ %
30-Day Delinquency:	\$ _____	# _____	_____ %
60-Day Delinquency:	\$ _____	# _____	_____ %
90-Day Delinquency:	\$ _____	# _____	_____ %
120 Day & Over Del:	\$ _____	# _____	_____ %
Total Delinquency:			_____ %
* Annualized REO Foreclosures:			_____ %

California Total Only: Single Family Serviced Loans: As of: 12/31/2002

	<u>Dollars</u> <u>(in Millions)</u>	<u>Number of Loans</u> <u>in Thousands)</u>	<u>Delinquency</u> <u>Ratio</u> <u>(#)</u>
Total Portfolio Bal.:	\$ _____	# _____	_____ %
30-Day Delinquency:	\$ _____	# _____	_____ %
60-Day Delinquency:	\$ _____	# _____	_____ %
90-Day Delinquency:	\$ _____	# _____	_____ %
120 Day & Over Del:	\$ _____	# _____	_____ %
Total Delinquency:			_____ %
* Annualized REO Foreclosures:			_____ %

California Total Only: Single Family Serviced Loans: As of: 2003 (Month): _____

	<u>Dollars</u> <u>(in Millions)</u>	<u>Number of Loans</u> <u>in Thousands)</u>	<u>Delinquency</u> <u>Ratio</u> <u>(#)</u>
Total Portfolio Bal.:	\$ _____	# _____	_____ %
30-Day Delinquency:	\$ _____	# _____	_____ %
60-Day Delinquency:	\$ _____	# _____	_____ %
90-Day Delinquency:	\$ _____	# _____	_____ %
120 Day & Over Del:	\$ _____	# _____	_____ %
Total Delinquency:			_____ %
* Annualized REO Foreclosures:			_____ %

Total is defined as Servicer's California Total Single Family Servicing Portfolio



Application to Service Loans

DELINQUENCY HISTORY (CALIFORNIA LOANS ONLY)

California FHA FRMs Only: Single Family Serviced Loans: As of: 12/31/2001

	<u>Dollars</u> <u>(in Millions)</u>	<u>Number of Loans</u> <u>in Thousands)</u>	<u>Delinquency</u> <u>Ratio</u> <u>(#)</u>
Total Portfolio Bal.:	\$ _____	# _____	_____ %
30-Day Delinquency:	\$ _____	# _____	_____ %
60-Day Delinquency:	\$ _____	# _____	_____ %
90-Day Delinquency:	\$ _____	# _____	_____ %
120 Day & Over Del:	\$ _____	# _____	_____ %
Total Delinquency:			_____ %
* Annualized REO Foreclosures:			_____ %

California FHA FRMs Only: Single Family Serviced Loans: As of: 12/31/2002

	<u>Dollars</u> <u>(in Millions)</u>	<u>Number of Loans</u> <u>in Thousands)</u>	<u>Delinquency</u> <u>Ratio</u> <u>(#)</u>
Total Portfolio Bal.:	\$ _____	# _____	_____ %
30-Day Delinquency:	\$ _____	# _____	_____ %
60-Day Delinquency:	\$ _____	# _____	_____ %
90-Day Delinquency:	\$ _____	# _____	_____ %
120 Day & Over Del:	\$ _____	# _____	_____ %
Total Delinquency:			_____ %
* Annualized REO Foreclosures:			_____ %

California FHA FRMs Only: Single Family Serviced Loans: As of: 2003 (Month):

	<u>Dollars</u> <u>(in Millions)</u>	<u>Number of Loans</u> <u>in Thousands)</u>	<u>Delinquency</u> <u>Ratio</u> <u>(#)</u>
Total Portfolio Bal.:	\$ _____	# _____	_____ %
30-Day Delinquency:	\$ _____	# _____	_____ %
60-Day Delinquency:	\$ _____	# _____	_____ %
90-Day Delinquency:	\$ _____	# _____	_____ %
120 Day & Over Del:	\$ _____	# _____	_____ %
Total Delinquency:			_____ %
* Annualized REO Foreclosures:			_____ %



Application to Service Loans

DELINQUENCY HISTORY (CALIFORNIA LOANS ONLY)

California VA Only: Single Family Serviced Loans: As of: 12/31/2001

	<u>Dollars</u> <u>(in Millions)</u>	<u>Number of Loans</u> <u>in Thousands)</u>	<u>Delinquency</u> <u>Ratio</u> <u>(#)</u>
Total Portfolio Bal.:	\$ _____	# _____	_____ %
30-Day Delinquency:	\$ _____	# _____	_____ %
60-Day Delinquency:	\$ _____	# _____	_____ %
90-Day Delinquency:	\$ _____	# _____	_____ %
120 Day & Over Del:	\$ _____	# _____	_____ %
Total Delinquency:			_____ %
* Annualized REO Foreclosures:			_____ %

California VA Only: Single Family Serviced Loans: As of: 12/31/2002

	<u>Dollars</u> <u>(in Millions)</u>	<u>Number of Loans</u> <u>in Thousands)</u>	<u>Delinquency</u> <u>Ratio</u> <u>(#)</u>
Total Portfolio Bal.:	\$ _____	# _____	_____ %
30-Day Delinquency:	\$ _____	# _____	_____ %
60-Day Delinquency:	\$ _____	# _____	_____ %
90-Day Delinquency:	\$ _____	# _____	_____ %
120 Day & Over Del:	\$ _____	# _____	_____ %
Total Delinquency:			_____ %
* Annualized REO Foreclosures:			_____ %

California VA Only: Single Family Serviced Loans: As of: 2003 (Month): _____

	<u>Dollars</u> <u>(in Millions)</u>	<u>Number of Loans</u> <u>in Thousands)</u>	<u>Delinquency</u> <u>Ratio</u> <u>(#)</u>
Total Portfolio Bal.:	\$ _____	# _____	_____ %
30-Day Delinquency:	\$ _____	# _____	_____ %
60-Day Delinquency:	\$ _____	# _____	_____ %
90-Day Delinquency:	\$ _____	# _____	_____ %
120 Day & Over Del:	\$ _____	# _____	_____ %
Total Delinquency:			_____ %
* Annualized REO Foreclosures:			_____ %



Application to Service Loans

DELINQUENCY HISTORY (CALIFORNIA LOANS ONLY)

California RHS Only: Single Family Serviced Loans: As of: 12/31/2001

	<u>Dollars</u> <u>(in Millions)</u>	<u>Number of Loans</u> <u>in Thousands)</u>	<u>Delinquency</u> <u>Ratio</u> <u>(#)</u>
Total Portfolio Bal.:	\$ _____	# _____	_____ %
30-Day Delinquency:	\$ _____	# _____	_____ %
60-Day Delinquency:	\$ _____	# _____	_____ %
90-Day Delinquency:	\$ _____	# _____	_____ %
120 Day & Over Del:	\$ _____	# _____	_____ %
Total Delinquency:			_____ %
* Annualized REO Foreclosures:			_____ %

California RHS Only: Single Family Serviced Loans: As of: 12/31/2002

	<u>Dollars</u> <u>(in Millions)</u>	<u>Number of Loans</u> <u>in Thousands)</u>	<u>Delinquency</u> <u>Ratio</u> <u>(#)</u>
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90-Day Delinquency:	\$ _____	# _____	_____ %
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Total Delinquency:			_____ %
* Annualized REO Foreclosures:			_____ %

California RHS Only: Single Family Serviced Loans: As of: 2003 (Month): _____

	<u>Dollars</u> <u>(in Millions)</u>	<u>Number of Loans</u> <u>in Thousands)</u>	<u>Delinquency</u> <u>Ratio</u> <u>(#)</u>
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30-Day Delinquency:	\$ _____	# _____	_____ %
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Total Delinquency:			_____ %
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RHS is defined as USDA Rural Housing Service



Application to Service Loans

DELINQUENCY HISTORY (CALIFORNIA LOANS ONLY)

California Conventional FRMs Only: Single Family Serviced Loans: As of:
12/31/2001

	<u>Dollars</u> <u>(in Millions)</u>	<u>Number of Loans</u> <u>in Thousands)</u>	<u>Delinquency</u> <u>Ratio</u> <u>(#)</u>
Total Portfolio Bal.:	\$ _____	# _____	_____ %
30-Day Delinquency:	\$ _____	# _____	_____ %
60-Day Delinquency:	\$ _____	# _____	_____ %
90-Day Delinquency:	\$ _____	# _____	_____ %
120 Day & Over Del:	\$ _____	# _____	_____ %
Total Delinquency:			_____ %
* Annualized REO Foreclosures:			_____ %

California Conventional FRMs Only: Single Family Serviced Loans: As of:
12/31/2002

	<u>Dollars</u> <u>(in Millions)</u>	<u>Number of Loans</u> <u>in Thousands)</u>	<u>Delinquency</u> <u>Ratio</u> <u>(#)</u>
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90-Day Delinquency:	\$ _____	# _____	_____ %
120 Day & Over Del:	\$ _____	# _____	_____ %
Total Delinquency:			_____ %
* Annualized REO Foreclosures:			_____ %

California Conventional FRMs Only: Single Family Serviced Loans: As of: 2003
(Month): _____

	<u>Dollars</u> <u>(in Millions)</u>	<u>Number of Loans</u> <u>in Thousands)</u>	<u>Delinquency</u> <u>Ratio</u> <u>(#)</u>
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Application to Service Loans

COMPLETE AND ATTACH THIS PAGE

ACKNOWLEDGEMENT

I affirm that all information submitted with and attached to this application is true and correct. I hereby authorize CalHFA, at its discretion, to verify the information with any other sources, and I hereby waive any cause of action or claim I may have against such sources with respect to any information they may provide.

By: _____
Authorized Signature

Name and Title: _____

Company: _____

Date: _____

(AFFIX CORPORATE SEAL, AS APPLICABLE)